WOMAN'S WORK

IN THE

FIELD OF MEDICINE

Dr. Alexander B. Mott,
62 Madison Av.,
New York, N. Y.

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WOMAN'S WORK

IN THE

FIELD OF MEDICINE.

COLLEGE OF MIDWIFERY

OF THE

CITY OF NEW YORK.

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WOMAN'S WORK

IN THE

FIELD OF MEDICINE.

"The proper study of mankind is man."—POPE.
"The proper study of women is woman."—COL. MID.

DR. OLIVER WENDELL HOLMES, some years ago, wrote as follows to a young man who requested his advice about becoming a doctor:

"MY DEAR YOUNG FRIEND—To be a physician the following requisites, if not absolutely necessary, are very desirable: *First*—A sound constitution. The wear and tear are very great, and cares, broken rest, irregular meals, and exposure of all kinds demand great stamina. *Second*—An unselfish nature. You must always think of your patient's welfare, not of your own comfort or habits. *Third*—You must be content to wait a long time before you establish a paying reputation. *Fourth*—Much of your work being distasteful, wearisome, wearing to the body, and almost fruitless to the mind, you must gradually harden yourself to the routine, and for this you ought to have an easy and accommodating

temper. *Fifth*—You must be in constant familiarity with suffering of all kinds, which must either make your feelings tough or keep you in distress. Medicine is very exacting. I don't believe much in literary doctors. I would not have one that was in the habit of scribbling verse, or stories, or anything of the kind.

"Yours very truly, O. W. Holmes."

In the above letter of Dr. Holmes can be found some of the reasons why medical schools for women have usually proved unsuccessful. They have undertaken too much in compelling women to go through the whole curriculum of surgery, pharmacy, materia medica, jurisprudence, etc. Take, for instance, the Woman's Medical College of the New York Infirmary of the City of New York. An excellent institution, thoroughly organized, well equipped with every appliance to enable the student to prepare herself for the practice of medicine, and a corps of professors and instructors that would do honor to any college; yet in the last fourteen years they have only graduated ninety-seven, an average of seven a year, and after fourteen years of hard work on the part of its managers, the graduating class of 1883 contained five. Admitting that women are capable of assuming and maintaining as high a rank in the profession as men, and hoping that the door of every institution of learning will be thrown wide open for their entrance, there still remains sufficient cause for asserting that to make regular practitioners of medicine of women will, except in a few isolated cases, prove unsuccessful.

The College of Midwifery owes its success principally to the fact that it teaches what, by experience,

has been found to cover the sphere of woman's usefulness in medicine, viz.: Midwifery and such branches of medical education only as are necessary to a complete understanding of the same; the intention being not to make regular practitioners of medicine, but to educate women in those special duties of the profession for which they are peculiarly adapted.

Inaugurating a new departure in medical education in the United States in the establishment of a school for the benefit of all who might desire a more thorough and practical training in the art of midwifery, its founders, while believing time would popularize the movement, were scarcely prepared for its prompt recognition and immediate success. During the first six-months' session fourteen students attended, and at the completion of the course ten passed a very creditable examination. The Trustees, believing that the interests of the institution and the community would be the better served by teaching a limited number thoroughly and well, rather than send out a large class unqualified, have fixed the standard of requirements high, the examination being impartially made by a board of censors.

The field for this specialty of the practice of medicine, which in this country has thus far been almost entirely monopolized by physicians, is in Europe conceded to midwives; and this would be the case here were there a sufficient number of properly educated women to do the work. In the city of Paris there are 1,500 midwives, while in the city of New York there are less than 200, and of these not over 50 have received the necessary education required for the responsible duties of their profession.

It is not necessary to lay open the entire subject of obstetrics to the midwife. On the contrary, her practice should be strictly limited; the knowledge imparted serving mainly to indicate to her when the accoucheur is to be called in, and that the office of the midwife is to attend women in natural labor.

Thus instructed the intelligent and educated midwife holds an extremely responsible position; and it is the intention of the Board of Trustees that all of the students of the College of Midwifery shall be so taught that, at the examination for the diploma of the college, the knowledge they possess of their duties will be such as to convince the Board of Censors that they not only know how to manage a normal labor, but, above all, when to send for a physician and what to do pending his arrival.

That the need of such an institution has been felt in this country is fully demonstrated by the following congratulatory and commendatory notices and editorials of the four leading weekly medical journals of the United States, viz.: the *Medical Record* and the *New York Medical Journal* of New York City; the *Boston Medical and Surgical Journal* of the city of Boston; and the *Cincinnati Lancet and Clinic* of the city of Cincinnati.

COMMENTS OF THE MEDICAL PRESS.

The New York Medical Journal, April 7, 1883.

A College of Midwifery.

Under this name a school has been started in New York for the instruction of midwives. Each session comprises a three-months' course, four evening lectures being given each week, in addition to demonstrations, recitations, and bedside teaching. The faculty consists of Dr. Paul F. Mundé and Dr. Benjamin F. Dawson, censors, and Dr. James O'Reilly, Dr. John Alsdorf, Dr. Thomas H. Wilcox, and Dr. Jacob Hartmann, instructors. A diploma is to be given after satisfactory examination.

The New York Medical Journal, April 14, 1883.

The Training of Midwives.

In our last issue we briefly noted the establishment of a college of midwifery in New York. It seems strange that so large a city, with a considerable proportion of its inhabitants actually dependent upon the services of midwives, should thus far have been destitute of any adequate provision for their education. We therefore look with much satisfaction upon the organization that we have mentioned.

The time has come when the profession must concede to the midwife a legitimate place in the community. It is not many years ago that the women were very few who, if at all above the abject poverty that drove them into a hospital for their lying-in, were not able to avail themselves of the services of a competent physician, but with the continued immigration that has been going on all this is changed, and there are now thousands of poor women who, if compelled to make the choice between the attendance of a medical practitioner and a resort to some public

charity, would find themselves under the necessity of adopting the latter expedient.

Most of the midwives of New York are of foreign birth and training, if they can be said to have been trained at all, and their ways do not commend them to people of American birth. Hence many a woman that could have afforded the services of one of the guild has shrunk from the experiment, and become a burden for the time being on the community. Now, however, with the facilities that the College of Midwifery promises to afford, we may look to see a class of American midwives arise among us. The result of such a change we cannot but consider as likely to prove conducive to the welfare of all concerned. We are quite persuaded that those of our profession who, for one reason or another, practise obstetrics for fees utterly out of proportion to the value of the services rendered will not suffer to any great extent by reason of the establishment of a class of trained midwives, for the latter will draw their support rather from those who now pay no fees at all than from those who are able to employ even the humblest practitioner of medicine.

It is a question if it would not be well to invest the college, in addition to its educational function, with the power of licensing midwives who are already plying their art here, or who may hereafter come to us from abroad with the intention of doing so. The auspices under which the institution starts seem to us an abundant guarantee that such discretionary and supervisory power could safely be committed to the gentlemen who make up its faculty.

Boston Medical and Surgical Journal, April 12, 1883.

The latest addition to the institutions for medical teaching in the city of New York is the "College of Midwifery," which has just been opened in connection with the Metropolitan Dispensary, on Seventh Avenue, near Thirty-fourth Street. Organized and incorporated for the purpose of affording practical and scientific instruction in the obstetric art, it is said to be, with two exceptions, the only institution of similar design in America. The course of instruction will consist of lectures in English (though the French, German, or Spanish language will be used

when necessary), with demonstrations, recitations, and practical teaching in subjects involving manipulations. The students will be taught practical midwifery at the bedside, and then have a sufficient number of cases allotted to their care, with the privilege of summoning one of the instructors should difficulties arise. The Metropolitan Dispensary, which occupies a portion of the college building, will furnish abundant clinical material in its out-door department, and the instructors in the college are members of the Dispensary staff. Each session (of which there will be three during the present year) comprises a three-months' course, and four evening lectures a week will be given in the following branches: anatomy, physiology, midwifery, and diseases incident to pregnancy and confinement, including the care and management of the child. Each candidate for graduation and diploma will be required to pass a satisfactory examination, before a board of censors, in the several branches taught in the lectures during the session. The faculty will consist of Drs. Benjamin F. Dawson and P. F. Mundé, censors; Dr. James O'Reilly, instructor in midwifery: Dr. John Alsdorf, instructor in physiology; Dr. Thomas H. Wilcox, instructor in diseases of women; and Dr. Jacob Hartmann, instructor in anatomy. The spring session commenced April 9th.

The Cincinnati Lancet and Clinic, May 19, 1883.

If there is one thing which more than any other demands the immediate attention of the medical profession in this city, it is the regulation of midwives. Now and again feeble attempts have been made to attract public interest in this matter, but thus far nothing has been accomplished. The evil done by the malpractice of midwives is simply incalculable. Where one case of this sort reaches the notice of a physician, an hundred are suppressed! Where an hundred physicians know of such terrible, even murderous, results of ignorant charlatanism, one only turns aside from the comfortable quiet of his calling and, agitated himself, tries to agitate his brethren in behalf of the victims who are daily, aye, almost hourly, sacrificed upon this altar of ignorance!

Is the picture overdrawn?

Ask any physician who makes a specialty of obstetrics and

diseases of women! Ask any physician, even one whose practice is not extensive in this direction, and you will find that almost every one has his case to relate where, through the brutish ignorance and stupidity of some midwife, a woman has died, or her child has died, perhaps both. Ask the specialist in gynecology how many cases of uterine disease—to say nothing of other consequences—he can trace to the midwife!

Have we aught to say against the existence of the midwife? Nothing. The intelligent and educated midwife holds a very useful and many times almost a necessary position. In Germany and France the midwife is as essential in the community as the curate, the lawyer, and the doctor. Abroad the importance of the midwife has been recognized, and in order that her calling may be protected against the invasion of unqualified women, the State erects a legal barrier in the shape of a strict examination. Indeed, the amount of knowledge on the subject of obstetrics, etc., demanded of midwives in Germany, as gauged by the text-books for midwives, is so extensive that it might startle an incompetent physician in this country. Yet it must not be thought that this knowledge lays open the entire field of obstetrics for the practice of the midwife.

On the contrary, her practice is strictly limited. Her knowledge serves mainly to indicate to her when the accoucheur is to be called in. Hence the office of the midwife is to attend women in natural labor, *i.e.*, where all conditions are such, in point of time, circumstances, etc., as to fit the term "natural," and where no haste is required by reason of disease, etc. In other words, where the powers of nature will in a reasonable length of time and with the greatest advantage to the mother and child complete the labor, there the midwife has her place and need not demand the attention of the physician. Yet she sits at the bedside of the woman as the keeper of a lighthouse at his lamps and danger signals: the night may pass without tempest or danger of disaster, but on the other hand at any moment he may be called upon to expose the danger signals. A ship may cross the ocean in safety, but when she nears the harbor the pilot is taken aboard to steer her through the reefs and rocks, channels and shallows which beset her. The midwife may be able to attend a woman in confinement as well as a physician, provided always

"things are as they should be," but here is where the skill and knowledge of the midwife show themselves in being able to know that things *are* as they should be and to detect the moment when they *are not* as they should be.

In Cincinnati the population is largely composed of Germans. Germans love the customs of the Fatherland, hence their wives in most cases prefer midwives to physicians. If midwives in this country were what they should be, *i.e.*, what they are in Germany, we would have no word to offer in objection. But they are not. They are as a rule ignorant, and, worse than all, their ignorance is fearless. Four years ago in this city a young woman and her child were literally murdered by an ignorant German midwife. An inquest was held before the coroner of this county. The midwife was asked, among other things, whether she knew the shape of the pelvis. She replied that it was round, like a stovepipe. She was asked whether she thought that it made any difference whether the child lay crosswise or with its long diameter in correspondence with the long diameter of the uterus. She knew positively that it made no difference what the position of the child was in the womb so long as the mother fell into the hands of a skilful midwife. She was asked whether she had any credentials or certificates of examinations from Germany. She drew from her pocket a yellow, dingy piece of paper, and with a look of triumphant innocence upon the people in the audience, she handed it to the coroner. He read its contents aloud, and they developed the extremely satisfactory and guilt-dispelling information that the bearer, Mrs. ——, had been a chambermaid in the family of Dr. ——, of Hamburg, for two years. The woman could not read, and had brought this practical joke of a German physician with her to America as her credentials for the practice of midwifery and as full authority permitting her to place on her sign "German Examined Midwife." This woman had made quite a little fortune at her business, and to-day, notwithstanding the *exposé* which the newspapers gave to the wretched affair above detailed, is still in active practice in our midst.

Not long ago a man died, leaving a wife and five children destitute. The wife was asked by the physician who had attended her husband: "What will you do for the support of yourself

and your children?" She replied, "I am too weak to take in washing, and I do not know enough about sewing to make my living at that, and [with a smile] so I shall become a midwife. I've had five children myself, and I think I ought to know something about the matter." Sure enough, a few days afterward the physician observed as he passed by the all-too-frequent sign "Hebamme" swinging before her door.

Midwives are necessary, because in many cases among the robust poor no attention on the part of the physician is demanded, and because the midwife for a trifling sum will attend to the mother and child from the time the patient is confined until she is again able to look after her household affairs. Yet a midwife holds an extremely responsible position, and the knowledge demanded of her should be such as to convince a competent board of examiners that she knows not only how to manage a normal labor, but *above all when to send for a physician and what to do pending the arrival of the physician.*

The Medical Record, June 30, 1883.

THE COLLEGE OF MIDWIFERY OF NEW YORK.

At the completion of the first annual course in this institution nine candidates presented themselves for examination. Of these, seven passed very creditably and two were rejected. The following are the names of the graduates in the order of their merit: Katie E. Vanderbilt, Marie Mount, Annetta Meyer, Kathrine Mergel, Bridget A. Mullady, Rosina Stuhlfauth, Theresa Hall. The standard of requirements for midwives is high, the examinations are impartially made by a board of censors, and the school is destined to be a success.

The New York Medical Journal, July 7, 1883.

THE COLLEGE OF MIDWIFERY.

At the close of its first session, the College of Midwifery, designed for the education of midwives, recently granted diplomas to the following-named pupils: Katie E. Vanderbilt, Marie Mount, Annetta Meyer, Kathrine Mergel, Bridget A. Mullady, Rosina Stuhlfauth, Theresa Hall. Out of a class of nine, two failed to pass the examination. The lady whose name heads the

list is said to have passed in a manner that would have been creditable to any medical student.

The Medical Record, October 6, 1883.

THE MIDWIFE AND HER RELATION TO THE PHYSICIAN.

The recent efforts made to legalize a State Board of Examiners for the medical schools, together with the prompt recognition and suppression by the County Medical Society of quackery in this city, has awakened an interest in medical education and legislation that bids fair to elevate the professional standard.

Coincident with this a movement is rapidly spreading among the larger cities throughout the country for the employment of intelligent women as nurses for the sick and to attend women in labor. It may be traced in part to the growing demand for opening a new field and offering women of the better classes increased facilities for self-support, but chiefly to recent advances in medical and surgical practice, which require nicer care and closer observation of the sick than untrained helpers can give. To supply these needs, "training schools" for nurses have been established in connection with certain of the larger general hospitals; while in this city a "College of Midwifery" has been recently organized.

The author of this paper desires to call the attention of the profession to this matter, so that the proper relation of the midwife to the physician may be determined. The time has come when the profession must concede to the midwife a legitimate place in the community. A writer, in the *New York Medical Journal* of April 14th, of an editorial on this subject, says: "With the continued immigration constantly going on, there are now thousands of poor women who, if compelled to make the choice between the attendance of a medical practitioner and a resort to some public charity, would find themselves under the necessity of adopting the latter expedient. Most of the midwives in the United States are of foreign birth and training, if they can be said to have been trained at all, and their ways do not commend them to people of American birth. Hence many a woman that could have afforded her services has shrunk from the experiment and become a burden on the community. With proper facilities for their education, and special legislation

to protect them, there is no reason why a class of intelligent, well-educated American midwives should not arise among us. The result of such a change cannot but prove conducive to the welfare of all concerned. Members of the profession who, for one reason or another, practise obstetrics for fees utterly out of proportion to the value of the services rendered, will not suffer to any great extent by the establishment of a class of trained midwives; for the latter will draw their support rather from those who now pay no fee at all than from those who are able to employ even the humblest practitioner of medicine." That the writer's views are correct no one will deny; for further confirmation we can turn to France or Germany, where the midwife is as essential in the community as the curate, the lawyer, and the doctor. Her importance has been recognized, and, in order that her calling may be protected against the invasion of unqualified women, the State erects a legal barrier in the shape of a strict examination. If midwives in the United States were what they should be, or what they are compelled to be in Germany, there would be no need of any special legislative enactment; but unfortunately they are not. They are, as a rule, ignorant, and worse than all, their ignorance is fearless; the evil done by their malpractice is beyond comprehension. Any physician who makes a specialty of obstetrics and diseases of women, and even one whose practice is not extensive in this direction, will be able to relate many cases where, through the brutish ignorance and stupidity of some midwife, a woman or her child, perhaps both, have died, to say nothing of the many uterine diseases traceable to her mismanagement.

Recognizing these facts, it is time that the profession should make some effort to elevate the midwife to her proper position in the community. It is not necessary to lay open the entire field of obstetrics to the midwife. On the contrary, her practice should be strictly limited; the knowledge imparted serving to indicate to her not only how to manage a normal labor, but above all when to send for a physician and what to do pending his arrival.

Thus instructed, with proper legislation to protect the people from incompetency, the midwife's relation to the physician would be established, and her position in the community made useful and necessary.

UNIVERSITY OF THE STATE OF NEW YORK.

The College of Midwifery of the city of New York forms one of the schools of the University of the State of New York.

Its charter of incorporation, approved and indorsed by the *Supreme Court*, and certified by the *Secretary of State* at the Capitol in the city of Albany, gives the Board of Trustees of the College authority to confer the Diploma of

GRADUATE IN MIDWIFERY.

No other College, School or Institution of any name or kind, incorporated or not, has any legal right to grant a diploma of Graduate in Midwifery.

HENRY D. CAREY, President.

DAVID S. LACEY, Secretary.

Universität des Staates New York.

Das College für Hebammen der Stadt New York, ist eine der

Universitäts-Schulen des Staates New York.

Ihre Incorporations-Charter, genehmigt und bestätigt von der Supreme Court (Obergericht) und bescheinigt vom Staats-Secretär im Staatshause in der Stadt Albany, gab dem Board of Trustees die Vollmacht die Diplome

Graduate of Midwifery, zu ertheilen.

[Graduirte Hebamme.]

Keine andere College, Schule oder Institute von irgend einen Namen oder der Art gemäß, incorporirt oder nicht, hat kein gesetzliches Recht ein Diplom (Graduate of Midwifery) zu gewähren.

Henry D. Carey, Präsident.

David S. Lacey, Secretär.

COLLEGE OF MIDWIFERY

OF THE

CITY OF NEW YORK.

449 and 451 Seventh Avenue,

near Thirty-fourth Street.

The only regular institution in America incorporated for the purpose of conferring on Women the diploma of

GRADUATE IN MIDWIFERY.

BOARD OF SUPERVISION.

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PAUL F. MUNDÉ, M.D.,

Censor. Professor of Gynæcology in the New York Polyclinic, and in Dartmouth Medical College; Gynæcologist to Mt. Sinai Hospital; Physician to the Maternity Hospital.

BENJAMIN F. DAWSON, M.D.,

Censor. Professor of Diseases of Women in the New York Post Graduate Medical School; Assistant Surgeon to the New York State Woman's Hospital; Physician to the New York Foundling Asylum; Consulting Surgeon to the Woman's Dispensary and Hospital, Brooklyn, N. Y.

JAMES O'REILLY, M.D.,

Professor of Obstetrics. Consulting Physician to the Metropolitan Dispensary for Women; Gynæcologist to the Woman's Infirmary.

JOHN ALSDORF, M.D.,

Professor of Diseases of Women. Consulting Physician to the Metropolitan Dispensary for Women; Gynæcologist to the Woman's Infirmary; District Physician of the New York Lying-in Asylum.

JACOB HARTMANN, M.D.,

Professor of Anatomy, and French and Spanish Instructor in Obstetrics. Physician to the Metropolitan Dispensary for Women.

SARAH E. POST, M.D.,

Professor of Physiology. Attending Physician to the Out-door Department of the New York Infirmary for Women and Children.

HENRY F. HESSLER, M.D.,

Professor of Clinical Midwifery, and German Instructor in Obstetrics.

THE COLLEGE OF MIDWIFERY,

organized and incorporated for the purpose of affording practical and scientific instruction in the art of midwifery, will endeavor to supply such a course to all who may wish to avail themselves of its benefits.

Encouraged by the endorsement of the profession, strengthened by the experience acquired in the past, with an enlarged corps of teachers and increased facilities for clinical work, the present course of the College of Midwifery opens full of the promise of future usefulness.

PLAN OF INSTRUCTION.

Instruction will be given in English, German, French, or Spanish, in the form of lectures, recitations, and demonstrations in subjects involving manipulations, through a period of three months; and this will be supplemented by three months of practical work in the allotment of a sufficient number of cases to the exclusive care of the students, with the privilege of summoning one of the instructors should difficulties arise. In this way they will become familiar with the management of both natural and difficult labors. A Woman's Infirmary and Maternity Home has recently been organized in connection with the college, in the wards of which the pupils will be required to nurse during the last three months.

COLLEGE BUILDING.

The situation of the college building is in every way unexceptionable. Located on Seventh Avenue, near Thirty-fourth Street, the elevated railroads and several lines of street cars make it easily accessible from all parts of the city.

CLINICAL MATERIAL.

The Metropolitan Dispensary for Women, occupying part of the college building, whose classes aggregate over six hundred patients a month, can furnish in its Out-door Department more clinical material in midwifery than any class in the college, no matter how large, can conveniently use. In fact the staff of the Maternity Department have, during the past three months, been overburdened with applications, and their resources have been taxed to the utmost in order to provide for the many cases committed to their charge. The instructors in the college being members of the dispensary staff, special facilities are afforded the students to perfect themselves not only in making examinations, but in the various manipulations that may be required of them at the bedside. No institution of similar design is so completely organized in all its branches, or so fully equipped with the appliances requisite for such a course.

SESSIONS.

Each session comprises a six-months' course : three months of didactic instruction, and three months of clinical work. During the didactic course, one lecture will be given in the German language, from

seven to eight, and in the English from eight to nine o'clock, on Monday, Tuesday, Friday, and Saturday evenings of each week, in the following branches: Anatomy, physiology, midwifery, and diseases incident to pregnancy and confinement, including the care and management of the mother and child. The sessions will be held during the year as follows:

The winter session will begin on the first Monday in January.

The spring session will begin on the first Monday in April.

The summer session will begin on the first Monday in July.

The fall session will begin on the first Monday in October.

GRADUATION AND FEES.

Each candidate for graduation and diploma will be required, at the close of the three-months' didactic course, to pass a satisfactory examination before the Board of Censors in the several branches taught in the lectures of the session. A certificate will then be furnished which, upon the completion of the three-months' practical course, will be exchanged for the diploma of the college.

The necessary expenses for graduation are as follows:

Matriculation	$5 00
Tickets for the full course of lectures	75 00
Examination fee	25 00
Total	$105 00

Should the candidate fail to pass a satisfactory examination, admittance to the next course of lectures

will be permitted upon payment of the matriculation fee only.

BOARD AND LODGING.

The college will make every effort to obtain for students good board and rooms at cheap rates. Board and rooms can be had in private families for four dollars per week and upward. Strangers in the city can come at once to the office of the college, with the certainty of finding information about board and lodging.

The lectures all being delivered in the evening will give students an opportunity to materially reduce their expenses by engaging in some lucrative employment during the day.

Further information can be obtained by addressing John Alsdorf, M.D., Dean, or calling upon him from two to four o'clock P.M., at the college building, 449 and 451 Seventh Avenue, near Thirty-fourth Street, New York City.

By order of the Board of Trustees.

HENRY D. CAREY, *President.*

DAVID S. LACEY, *Secretary.*

WOMAN'S INFIRMARY

AND

MATERNITY HOME

OF THE

CITY OF NEW YORK.

(INCORPORATED.)

OUT-DOOR DEPARTMENT,

Nos. 449 and 451 Seventh Avenue

(College of Midwifery Building),

Near Thirty-fourth Street.

Open daily (except Sunday), from 1 to 4 P.M.

WILLIAM F. BACHE, President.

EUGENE VREELAND, Secretary.

MEDICAL AND SURGICAL STAFF.

CONSULTING GYNÆCOLOGISTS.

J. MARION SIMS, M.D.,

Consulting Surgeon to the New York State Woman's Hospital; ex-President of the American Medical Association.

PAUL F. MUNDÉ, M.D.,

Professor of Gynæcology in the New York Polyclinic, and in Dartmouth Medical College; Gynæcologist to Mt. Sinai Hospital; Physician to the Maternity Hospital.

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JOHN ALSDORF, M.D.,

Professor of Diseases of Women in the College of Midwifery; Consulting Physician to the Metropolitan Dispensary for Women; District Physician of the New York Lying-in Asylum.

In Memoriam.

J. MARION SIMS, M.D.

The Board of Trustees of the woman's Infirmary desire to place upon record a minute of their appreciation of the eminent physician, surgeon, and gynecologist, their late consultant,

J. MARION SIMS, M.D.

Dr. Sims had accepted the appointment of Consulting Gynæcologist to the Infirmary, and only a short time before his death expressed himself as heartily in favor of its aims and objects.

In the decease of Dr. Sims the Board of Trustees share with their fellow-citizens the loss of a philanthropic, upright, public-spirited, and estimable physician and surgeon, who, full of years and honor, has passed to his rest.

Resolved, That the Secretary be requested to transmit a copy of the above minute to the family of our late consultant, with the assurance of our sincerest sympathy in their bereavement.

OBJECTS OF THE INFIRMARY.

First.—*To afford women of all classes an opportunity to secure the services of SPECIALISTS in the treatment of uterine disease.*

Second.—*To render such treatment effectual by the most delicate care and advice, free from the exposure of a public institution.*

Third.—*To furnish all the special appliances known to medical science for the relief and cure of the many diseases peculiar to women.*

Fourth.—*To establish a Home where women, during maternity, can have strict privacy, superior accommodation, and the exclusive attendance of an experienced physician.*

Fifth.—*To provide a place where physicians may freely resort for consultation, and their patients receive the attention impossible to obtain where all cases are treated indiscriminately.*

THE MATERNITY HOME.

In order to accommodate married women during pregnancy and confinement, as well as protect the unmarried pregnant for the first time, the Trustees have established a *Maternity Home* in connection with the Infirmary.

The moral dangers and personal sufferings to which unmarried mothers are exposed can be greatly diminished by furnishing them with separate apartments in a respectable house and street, where they can have strict privacy, superior accommodations, and the exclusive attendance of an experienced physician and trained nurse. Many a woman, rather than endure the tongue of slander or suffer the exposure and supposed degradation of a confinement in the wards of a public institution, has sought deliverance in a suicide's grave.

In addition to confinements, patients of the Infirmary will be admitted to one of the private houses of the *Maternity Home* for medical and surgical treatment, and at the same time will be provided with all the comforts to which they have been accustomed.

Every patient is desired to bring a sufficient amount of clothing for herself, and when entering for confinement, two entire suits for the child. The terms of admission will depend upon the board, number and

location of the rooms, and service required, and will be furnished upon application.

Patients may apply for admission in person to the attending physician at the Out-door Department of the Infirmary, 449 and 451 Seventh Avenue, between 1 and 4 P.M., or by letter, enclosing, when possible, a certificate from a physician stating the nature of the case.

All communications should be securely sealed and addressed as follows :

COLLEGE OF MIDWIFERY,
449 AND 451 SEVENTH AVENUE,
New York City, N. Y.

PERSONAL.

DEAR DOCTOR :

In recommending students to the College of Midwifery, and patients to the Woman's Infirmary or Maternity Home if you will kindly notify the College by mail, giving, in the letter, as many particulars about the case as possible, you will confer a favor upon the institution, and your kindness and trouble will be greatly appreciated and duly acknowledged.

All letters from physicians requesting information upon any subject, professional or otherwise, will be received with pleasure and cheerfully answered.

UNIVERSIDAD DEL ESTADA DE NUEVA YORK.

El Colegio de Comadronas de esta cuidad de Nueva York forma parte de la Unîversidad del Estada de Nueva York.

El acta de incorporacion aprobada par la *Corte Suprema* y certifîcada por el *Secretario de Estado* de capitalio en la Cuìdad de Albany, autoriza al Board of Trustees del Colegio para conferir el diploma de

COMADRONA GRADUADA.

Ningun atro colegio escuela o' instituto de cualquier nombre o' clase, incorporando o no, tiene el privilegio de otorzar el diploma de Comadrona graduada.

HENRY D. CAREY, Presidente.

DAVID S. LACEY Secretario.

UNIVERSITÉ DE L'ÉTAT DU NEW YORK.

Le College du Sage femme de la ville du New York est une des écoles de la

Université de l'état du New York.

Son Chartre d'incorporation, approuvé et endossé par la *cour suprème* et certifié par le *Secrétaire de l'Etat* au Capitole dans la ville d'Albany don autorité au Board of Trustees du college à conferé la diplome du

GRADUÉ DU SAGE FEMME.

Nul autre college, ecole, ou institute d'un nom quelcouque ou classe, incorporé ou non, a aucune droit légal d'accorder un diplome du gradué du sage femme.

HENRY D. CAREY, Presidente.

DAVID S. LACEY, Secretaire.

PREGNANCY, MATERNITY,

AND

INFANCY.

A FEW SIMPLE DIRECTIONS FOR THE MANAGEMENT OF THE PREGNANT WOMAN, AND OF THE MOTHER AND CHILD, WITH DIETARY ARTICLES FOR THE SICK, BEING PART OF THE INSTRUCTION GIVEN TO

GRADUATES

OF THE

COLLEGE OF MIDWIFERY.

PREGNANCY.

The preservation of the health during pregnancy by careful attention to hygienic rules will prevent many complications and diseases that are likely to occur at the time of and immediately following labor.

During the pregnant state an abundance of fresh pure air is a matter of prime importance. Small, close, heated rooms, confinement in-doors, and crowded assemblages are to be avoided.

The food should consist of nutritious, easily digested articles. Pastry, confectionery, and the products of the frying-pan are apt to produce acidity, heartburn, flatulence, and colic. A good appetite is the best safeguard against most of the discomforts of pregnancy.

The dress should be loose and easy. Garters and tight corsets should be discarded. When the enlargement of the abdomen removes the folds of the dress from the lower limbs, flannel drawers reaching to the waist should be worn as a protection.

Gentle exercise should be encouraged, walking and driving being the best means to maintain the appetite and aid in fostering sleep. Violent exercise should be avoided, especially at about the third and seventh month and at the recurrence of the menstrual periods, as liable to produce miscarriage. Long railway journeys at such times are a frequent cause of trouble.

The skin should be kept in good condition by frequent bathing, so as to relieve the kidneys of a portion of the work thrown upon them.

Pregnant women are often very irritable, and the

greatest forbearance and gentleness should be exercised ; their unreasonableness is the result of nervous derangement, and is not to be cured by either impatience or stern treatment.

The entire period of pregnancy among civilized women is very frequently attended with a great deal of discomfort, and the attempt to relieve minor ailments only begets hysteria by fixing the woman's attention upon them. The best medicine is to devise amusements and occupations calculated to produce a forgetfulness of self.

PUERPERAL STATE.

After the labor is completed, the woman placed upon clean, dry bedding, and the baby washed and dressed, the mother should enjoy a few hours of refreshing sleep. The room should be darkened and absolute stillness enforced. Should the mother feel faint and exhausted she should be allowed a cup of hot tea or gruel.

Great pains should be taken to keep the air of the lying-in chamber fresh and pure. The frequent use of an odorless disinfectant in and about the room is certainly of great importance, and experience has proven Platt's Solution of the Chlorides to be most valuable. If the room is warm the patient should be lightly covered, owing to the tendency during childbed to profuse perspiration. There is no foundation for the prevalent belief that it is dangerous to comb the hair of a puerperal woman.

During the first three days the patient is thirsty and indifferent to solid food, and the diet should consist of gruel, milk, milk-toast, and tea, to which may be added clear soups and beef-tea should more stim-

ulating aliments be called for. After the bowels have moved on the third or fourth day the normal appetite usually returns, when all easily digested articles of food, such as soft-boiled eggs, chicken broth, steak, chops, and the like, according to the taste of the patient, may be allowed. Cooked fruits are of service in overcoming the natural constipation of this period. There can be no reasonable objection to the judicious administration of stimulants, if the patient be weak and exhausted or accustomed to their use. The Hungarian wines imported by Mr. L. Reich will, on account of their absolute purity and uniform quality and excellence, be found of great service in such cases ; toward the termination of the puerperal month they may always be given with advantage, especially if convalescence be tardy.

Every healthy woman should nurse her child at least through the puerperal period. It should be applied to the breast after the mother has rested, and within the first twelve hours. Soon after birth the child seizes the nipple eagerly, and though the quantity of nourishment obtained is small it acts as a cathartic, and is infinitely better adapted to the child's needs than the catnip teas and sweet-oil which nurses usually employ as substitutes. The early application of the child to the breast benefits the mother by promoting the contraction of the womb, and by lessening the painful distention of the breasts which occurs at the time when the secretion of milk is fully established. During the first few days of the child's existence no rule can be laid down with regard to the frequency with which it should be placed to the breast. Afterward it should be accustomed to some regular routine. So long as the stomach is of small capacity the in-

terval should not exceed a couple of hours. After six months the child should not nurse oftener than five or six times in the twenty-four hours. From an early period, however, it should be accustomed to sleep six hours at night, which gives an opportunity for the mother to recuperate her strength. This can only be done by having the child occupy a separate bed. The breasts should be suckled in alternation, and the nipples carefully washed both before and after nursing.

Most women expect to sit up upon the tenth day. Not to leave the bed before that time is a safe rule, and in some cases a much longer period of time may be necessary. The continuance of the red discharge should serve as a warning against a change to the upright position. Household duties should be postponed until the woman can walk about without fatigue or backache.

CARE OF THE INFANT.

As the new-born infant possesses feeble powers of resistance to cold, the first bath should be 98°, or nearly that of the body. It is frequently covered with a fatty cheesy matter ; in such a case the skin may be rubbed with a little oil or lard, and gentleness employed in the removal of this substance before placing the child in the water. After a thorough washing with Packer's Tar Soap (valuable on account of its non-irritating, antiseptic, and deodorizing properties) and water it should be gently dried in soft, warm cloths, and the cord wrapped in an oiled rag ; or, what is better, a small piece of fine linen with a hole burnt in the centre through which the cord is passed, and held in place upon the left side by a flannel bandage. After the cord has separated the wounded surface should be

dressed with a carbolic salve until the discharge ceases. Cleanliness and fresh air are essential to healthy development. The child's toilet should be attended to every day. From the moment it wakes, and after it has been fed a little, the mother or nurse should, before the fire if it is winter, with a sponge and tepid water wash the little infant from head to foot. Dry it rapidly, as at first, with soft, warm cloths, and sprinkle a little rice powder or lycopodium upon those parts of the body where the skin is fine or likely to become excoriated by contact with the urine and other irritants. To avoid sprue the mouth of the child should be washed with cool water each time after nursing.

Should the mother be unable to nurse her child and find it impossible to procure the services of a wet-nurse, artificial feeding must be tried. For success, scrupulous cleanliness, punctuality, intelligence, and experience are requisite. Cow's milk of good standard quality, stirring it before using to distribute the fat-globules evenly, diluted according to the age of the child, and warmed to blood-heat, will be found the best substitute for mother's milk. Condensed milk is popular with many physicians, because children with whom it agrees fatten upon it and suffer but little from indigestion and loose passages. The large amount of sugar it contains unfits it, however, for prolonged use. The first three months of the child's existence, and in the city during the hot months of summer, it may be found of service. Whatever the preparation selected it should be warmed, a small quantity of salt and a grain or two of bicarbonate of soda, or a tablespoonful of lime-water added. Begin with eight tablespoonfuls of milk to eight of water, with a small quantity of gum

arabic or isinglass dissolved in it, increasing the milk and diminishing the water a tablespoonful at a time as rapidly as the digestive organs will permit. After a short time a thin decoction of oatmeal or barley, according to the tendency of the child to constipation or diarrhœa, may be used in the place of the gum arabic or isinglass-water. At the end of the third month great benefit will be derived from the addition to each bottle of a tablespoonful of Löfflund's Liebig's food for infants, or of Maltine, one of the best of the many malt extracts now so popular in this country.

The bottle from which the child is fed should be scalded each time that it is used, and should then be filled with cold water to which a little soda has been added. The tube and mouth-piece should both be washed, cleaned with a brush, and allowed to soak in cold water until needed. Unless every precaution is taken to prevent the development of fungi, a bottle-fed infant will never prosper.

In conclusion, let mothers beware how they take the advice that is so frequently and persistently tendered not to nurse their infant on account of the supposed impoverishment of their milk, or what is still worse, the plea of interference with family and society duties. They will find, when it is too late, that the beautiful roundness of outline and the freedom from many of the diseases of infancy, together with the easy dentition of infants at the breast, are rarely attainable by those who are brought up by hand. Bottle-fed infants are apt to be lean, to be subject to attacks of indigestion, and to suffer from nervous disturbances when teething. Remember that the milk, fresh and warm, springing from the very fountain of life, passing through natural channels, and by means of the nipple, also warm, sensitive, and supplied with all the structures of vitality, is conveyed directly into the mouth of the infant, a vital fluid, to nourish and comfort it. This very contact, so natural and so sublime, between mother and babe has a beneficient influence that can be obtained in no other way.

UNIVERSITY OF THE STATE OF NEW YORK.

The College of Midwifery of the city of New York forms one of the schools of the University of the State of New York.

Its charter of incorporation, approved and indorsed by the *Supreme Court*, and certified by the *Secretary of State* at the Capitol in the city of Albany, gives the Board of Trustees of the College authority to confer the Diploma of

GRADUATE IN MIDWIFERY.

No other College, School or Institution of any name or kind, incorporated or not, has any legal right to grant a diploma of Graduate in Midwifery.

HENRY D. CAREY, President.

DAVID S. LACEY, Secretary.

Universität des Staates New York.

Das College für Hebammen der Stadt New York, ist eine der

Universitäts-Schulen des Staates New York.

Ihre Incorporations-Charter, genehmigt und bestätigt von der Supreme Court (Obergericht) und bescheinigt vom Staats-Secretär im Staatshause in der Stadt Albany, gab dem Board of Trustees die Vollmacht die Diplome

Graduate of Midwifery, zu ertheilen.

[Graduirte Hebamme.]

Keine andere College, Schule oder Institute von irgend einen Namen oder der Art gemäß, incorporirt oder nicht, hat kein gesetzliches Recht ein Diplom (Graduate of Midwifery) zu gewähren.

Henry D. Carey, Präsident.

David S. Lacey, Secretär.

DIETARY ARTICLES.

DIETARY ARTICLES FOR THE SICK.

Peptonized Milk.

PEPTONIZED or pre-digested milk is conveniently so called, because by the action of the *Extractum Pancreatis* (its trypsin) the caseine of the milk is converted into peptone.

Directions for Peptonizing Milk with Extractum Pancreatis.

Into a clean quart bottle put a powder of 5 grains of Extractum Pancreatis and 15 grains of Bicarbonate of Soda, and a gill of cool water. Shake ; then add a pint of fresh cool milk.

Place the bottle in a pitcher of hot water, or set the bottle aside in a warm place for three-quarters of an hour, to keep the milk *warm.*

It must then immediately be put on *ice.*

Explanatory.

The degree of digestion is very simply regulated by the length of *time* in which the milk is kept *warm.*

When the milk is digested so long that it acquires a slightly bitter taste, it is because the caseine has been entirely digested into peptone. It is the taste of the peptone.

It is very rarely necessary to carry the peptonizing to this extent, and should not be done unless so ordered by the physician.

After either complete or partial digestion it is simply necessary, in order to prevent all further action, to at once place the bottle of peptonized milk on ice. It may then be kept on ice like ordinary milk.

For Bottle-fed Infants.

Partially Peptonized Milk is the best, most rational substitute for woman's milk, for regular feeding to the infant ; as by the action of the Extractum Pancreatis the *excess* of caseine is overcome by conversion into *peptone*, and formation of *hard* curds thus rendered impossible.

Skill and success in this use of the Extractum Pancreatis, as in any other operation, comes by practice. The mistake is often made, in the beginning, of peptonizing the milk *too much*. Don't arouse an antipathy on the part of your patients, at the outset, by trying to induce them to take the milk when it has been so much digested that it tastes disagreeably bitter.

Peptonized Milk Punch.

Punch may be prepared from peptonized milk after the same manner as with ordinary milk, except that the use of spirit will not curdle the milk, and *lemon juice*, *acid phosphate*, etc., may be freely used without producing curd, if the milk has been thoroughly peptonized. Peptonized punch is not only very *agreeable*, but where both stimulation and nutrition is sought its great value is apparent.

It is in such cases much superior to milk fermented with yeast (*koumiss*), for in this process the caseine is not at all digested.

Peptonized Beef-tea.

Take one-fourth lb. finely minced, raw *lean* beef, or same weight (of equal portions) of beef and chicken meat mixed, or chicken alone.

Cold water, one-half pint.

Cook over gentle fire, stirring constantly till it has boiled a little—a few minutes.

Then pour off the liquor, for future use, and beat or rub the meat to a paste, and put it into a jar or bottle with ½ pint of cold water and the liquor poured from the meat. Add—

Extractum Pancreatis (Fairchild's)..... 3 ss.
Soda Bicarb..... ℈ j.

Shake all well together, and set aside in a warm place, at about 110° to 115°, for three hours, stirring or shaking occasionally ; then boil quickly. It may then be strained or clarified with white of egg, in usual manner. Seasoning to taste, if condiments are permissible.

In the ordinary way of making "beef-tea," it is not putting it too strong to say that the *beef* is *thrown away*, and the water, containing only a minute quantity of *anything*, and *no peptones*, is given to the patient. This is a fact well known, but little heeded.

Our *Extractum Pancreatis* has been subjected to the most practical tests in the artificial digestion of Milk, Beef, Starch, etc., by many physicians in private practice, in Hospitals, Infant Asylums, etc.

It is an exceedingly valuable resource in the nutrition of the sick—during the progress of fevers and wasting diseases generally ; in Anorexia, Inanition, Gastric Ulcer, Uremic Vomiting, Cancer of the Stomach, Gastric Catarrh, both before and after seri-

ous surgical operations, and in all cases where ordinary nourishment is intolerable or inadequate.

We shall be pleased to forward, post paid, our pamphlet, containing explicit information upon all details of the use of Extractum Pancreatis, recipes, etc.; also reprints upon same subject from unsolicited contributions to the medical press, direction slips, etc., upon application to FAIRCHILD BROS. & FOSTER, the originators and makers of Extractum Pancreatis, Pepsine in Scales, etc., 60 Fulton Street, New York.

Toast-water.

Cut a slice of stale bread half an inch thick, and toast it brown, without scorching. Pour over it a pint of boiling water; cover closely till it cools; then pour off and strain it.

Rice-water.

Take of rice, two ounces; water, two quarts. Boil it for an hour and a half, then add sugar and nutmeg to taste. Some prefer *salt.*

An excellent drink in diarrhœa, dysentery, etc.

Barley-water.

Wash two ounces of pearl barley with cold water; put the barley in a pint and a half of fresh cold water, bring it to the boiling-point, and boil for twenty minutes in a covered vessel. Strain, sweeten to taste, and flavor with lemon-juice and a little lemon-peel. (In some cases the lemon had better be omitted.)

Boiled Flour.

Tie up a quart of flour in a pudding bag, tightly; put it into a pot of boiling water and leave it there,

boiling for several hours (all day or all night will not be too long). Then take out the flour ball and dry it near the fire. Peel off and throw away the thin outer portion, and grate down the mass, with a nutmeg-grater, into a powder.

One or two teaspoonfuls of this may be rubbed into a paste with a small portion of milk, then stirred into a pint of milk, which is to be *scalded, i.e.*, just brought to the boiling-point, without being boiled.

Useful in *infantile diarrhœa*, etc.

To Keep Ice for the Sick.

Cut a piece of clean flannel about eight inches square. Put this over the top of a glass tumbler, pressing the flannel down to half or more of the depth of the tumbler. Then bind the flannel fast to the tumbler with a tape or cord. When the ice has been put into this ice-cup, lay upon it another piece of flannel, three or four inches square. It will keep thus for hours.

Oatmeal Gruel.

Boil a pint of water in a saucepan ; when boiling, mix with it two tablespoonfuls of oatmeal (previously rubbed smooth with a little cold water), half a pint of milk, and a little salt. Let it then simmer for half an hour ; strain it through a hair-sieve, sweeten, and add a little nutmeg. A few raisins may be added before the boiling.

Vegetable Soup.

Put two potatoes, one tomato, and a piece of bread into a quart of water ; boil it down to a pint. Then

throw in a little chopped celery or parsley, and salt. Cover, and remove from the fire.

Bread-and-Butter Broth.

Spread a slice of well-baked bread with good fresh butter; sprinkle it moderately with salt and black pepper. Pour a pint of boiling water over it, cover, and let it stand a few minutes before use.

Lime-water and Milk.

Take of clear saturated lime-water and fresh milk each a wineglassful; mix. Let a tablespoonful or less be taken at once. This will sometimes remain upon an irritable stomach which will retain nothing else.

Chicken Broth.

Clean half a chicken and remove the skin; pour on it a quart of cold water, and salt to taste; add a tablespoonful of rice, and boil slowly for two or three hours; skim well, and add a little parsley.

Panada.

Cut two slices of stale bread, without crust; toast them brown, cut them up into squares of about two inches, lay them in a bowl and sprinkle with salt and a little nutmeg. Pour on a pint of boiling water, and stand to cool.

Arrowroot.

Mix a tablespoonful, or a tablespoonful and a half, with a little cold water, till it makes a paste. Boil a pint of water, stir in the arrowroot, and boil it a few minutes. Sweeten with white sugar. Brandy, whiskey, or wine may be added if necessary; and half or all

milk may be used instead of water. A little lemon- or orange-peel added before boiling will improve the flavor.

Tapioca.

Cover two tablespoonfuls of tapioca with a teacupful or more of cold water, and soak for two or three hours, or over night. Put it then into a pint of boiling water, and boil it until it is clear and of the desired consistence. Sugar, nutmeg, or wine, etc., may be added as required.

Sago Jelly.

Mix well together four tablespoonfuls of sago, the juice and rind of one lemon, and a quart of water. Sweeten to taste, let it stand half an hour, and boil it, stirring constantly, until clear. Then add a wine-glassful of wine ; currant wine will do.

Beef-tea.

Chop a pound of lean beef into very small pieces, pour over it a pint or less of cold water, cover, and let it stand two hours by the side of the fire. Then put it on the fire and boil it for half an hour. Remove the scum, skim off all the oil drops, and salt to taste. Pour it off, but *do not filter or strain it*, unless through a coarse sieve. *Good beef-tea should have a rich brown appearance when stirred.*

Frozen Beef-tea.

Place a convenient portion of beef-tea, in a bottle or other vessel, in an ice-cream freezer, and freeze it as cream would be frozen in making ice-cream. This will be useful in *protracted cholera infantum*, etc.

Farina Gruel.

Mix two tablespoonfuls of farina with a quart of water, and let this boil until it becomes thick. Add a pint of milk and a little salt, and then boil for a quarter of an hour longer. Sweeten according to taste.

Indian Meal Gruel.

Stir a tablespoonful of Indian meal till it becomes smooth in half a teacupful of cold water. Then mix it well with a teacupful of boiling water, and boil it until it is sufficiently thickened. Salt or sweeten to taste.

Rice Milk.

Boil a tablespoonful of rice for an hour and a half in a pint of fresh milk, then rub it through a fine sieve. Add a full teaspoonful of sifted white sugar, and boil again for two or three minutes.

Essence of Beef.

Cut up a pound of lean beef into small pieces, put it into a pint bottle, without water, cork it loosely, and immerse the bottle to its neck in cold water in a stewpan. Bring the water to a boil, and let it boil for two hours. Then pour off (do not filter) the essence.

Extract of Raw Beef.

Cut up good lean beef *very fine*, and put it with cold water (half a pint to a pound) in a bottle. Soak it for twelve hours, shaking it half a dozen times or more during that time. Then strain it off with pressure through a cloth ; or, better, pour it through a

coarse sieve. Mutton or chicken may be treated in the same way.

Oatmeal with Beef-tea.

Mix a tablespoonful of oatmeal quite smoothly with two tablespoonfuls of cold water. Add this to a pint of strong beef-tea, and heat to the boiling-point, stirring all the time. Boil for five minutes. Then remove from the fire, skim, and serve for use.

Roast Oysters.

Place a dozen fresh oysters, in the shell, upon a moderately strong fire, and allow them to remain there until the shells begin to open a little. Then remove them, open them at once, and serve them, with a little black pepper, and salt if they need it. This is the method of cooking oysters most favorable to their digestibility.

Liebig's Broth.

Chop half a pound of beef, mix it well with one drachm of table salt, four drops (ten would be better) of muriatic acid, and eighteen ounces of distilled water. Macerate for an hour, and strain through a fine hair-sieve. Dose, a teacupful. This contains the *soluble* constituents of the meat, but not all its nutritive elements.

Liebig's Food for Infants.

Mix together half an ounce of wheat flour, the same of malt flour, seven and a quarter grains of bicarbonate of potassium, and an ounce of water. Add five ounces of fresh milk, and put the whole upon a gentle

fire. When it begins to thicken, take it from the fire, stir it for five minutes, heat and stir again until it becomes quite fluid; finally boil it for a short time. Filter through a sieve to separate the bran; it is then ready for use. It will keep for twenty-four hours. Its effect is slightly aperient.

Meigs's Gelatin Food for Infants.

Soak for a short time in cold water a scruple (a piece two inches square) of prepared gelatin; then boil it in a half pint of water ten or fifteen minutes, until it dissolves. Stir into this (previously made into a paste with a little cold water), at the end of the boiling, a teaspoonful of arrowroot; also, from three to eight fluidounces (according to the age of the child) of milk; and, lastly, from half a fluidounce to two fluidounces of cream, and a moderate amount of loaf sugar.

Egg Broth.

Boil (after it has stood, mixed, half an hour) two ounces of pearl sago in half a pint of water, until it is smooth and thick. Beat the yolks of four fresh eggs with half a pint of cream; then mix with the sago, and stir the whole well with a quart of boiling beef-tea, just poured off. A tablespoonful of whiskey or half a glass of sherry wine may be added if required.

Wine Whey.

Boil half a pint of milk, and, while boiling, add a glass of Madeira or sherry wine. Separate the curd by straining through muslin or a sieve. Sweeten the whey to taste, and grate upon it a little nutmeg.

Egg and Wine or Brandy.

Beat up a raw fresh egg, and stir with it two tablespoonfuls of wine, or one of brandy. Sweeten or not, according to taste.

Caudle.

Beat up a raw egg with a wineglassful of sherry, and add to it half a pint of hot gruel. Flavor with lemon-peel, nutmeg, and sugar.

Milk Punch.

Into a tumblerful of milk put one or two tablespoonfuls of brandy, whiskey, or Jamaica rum. Sweeten, and grate nutmeg on top.

Ferruginous Chocolate.

Mix sixteen ounces of chocolate with half an ounce of carbonate of iron. Divide the mass into cakes of one ounce each. One may be dissolved in half a pint of hot milk, to be taken night and morning.

Koumiss of Cow's Milk.

To a quart of cow's milk add a teaspoonful of sifted white sugar and a teaspoonful of brewer's yeast. Leave it to stand for some hours until fermented; then serve for use, or else put away in strong bottles, well corked.

NOTE.—Physicians are requested to read pages 41 and 42.

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